



Hipperholme Urban District Council.

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# ANNUAL REPORT

## ON THE HEALTH OF THE URBAN DISTRICT COUNCIL

For the Year 1925.

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F. A. BELAM, M.D., Ch.B., D.P.H.,

— *Medical Officer of Health.* —  
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BRIGHOUSE :  
THE PREMIER PRINTING CO. (BRIGHOUSE), LTD.

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1926.





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# HIPPERHOLME URBAN DISTRICT COUNCIL.

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**Chairman :**

Councillor N. WOOD, J.P.

**Vice-Chairman :**

Councillor C. ROBINSON.

Councillor W. BUSSEY,

Councillor G. H. HEX,

„ E. BOTTOMLEY,

„ T. HOLGATE,

„ H. G. HAIGH,

„ J. R. LAWSON,

Councillor A. WOOD.

## PUBLIC HEALTH STAFF.

MEDICAL OFFICER OF HEALTH: F. A. Belam, M.D., Ch.B.,  
D.P.H., M.R.S.L. Also Medical Officer of Health and School  
Medical Officer of Brighthouse, M.O.H. Halifax Rural District and  
Medical Superintendent Joint Hospital Board.

SANITARY INSPECTOR: S. Dean, M.Inst.M. & Cy. E., A.R.S.L.,  
P.A.S.L., also Surveyor and Water Engineer.

TO THE CHAIRMAN AND MEMBERS OF THE HIPPERHOLME  
URBAN DISTRICT COUNCIL.

GENTLEMEN,

I beg to present my Annual Report upon the Health of the District for 1925, being my third.

The Report this year is a Survey of Public Health Work during the past five years, and is in strict conformity with the form set out in the circular of the Ministry of Health as to the contents and arrangements of the Annual Reports of Medical Officers of Health for 1925. It is therefore longer than an ordinary report.

I have the honour to be, Gentlemen,

Your obedient servant,

F. A. BELAM.

# HIPPERHOLME URBAN DISTRICT COUNCIL.

## ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH FOR THE YEAR 1925.

### NATURAL AND SOCIAL CONDITIONS OF THE AREA.

AREA	.. .. .	1195.6 acres.
POPULATION	.. 1921 (Census) 4799.	1925 (Estimated) 4679
PHYSICAL FEATURES	..	Geological formation : Sandstone grit overlying coal measures.

### GENERAL CHARACTER OF THE AREA :

Chiefly residential, but there are also several works, mills, etc., in the district. The most important factories are large carpet mills at Bailiff Bridge, employing a number of people of both sexes. Also in Bailiff Bridge are woollen, worsted and cotton mills. In addition to these, in Hipperholme itself there is a large chemical works, brewery, and tanneries. Other sources of employment, on a smaller scale, are quarries, boot making, bakeries, dressmaking and tailoring, confectionery, etc. There are garages where motor car repair and other work is done, also cabinet makers and other forms of woodwork, and also a steam laundry. Fifteen farms also form a part of the area. The residential part is Hipperholme and Lightcliffe, which latter extends down a hill into Bailiff Bridge, which is a purely manufacturing district.

NUMBER OF INHABITED HOUSES	.. 1921—1321	1925—1495
RATEABLE VALUE	.. .. .	£40,900 15s. 0d.
Sum represented by a Penny Rate	..	£152

On the whole, the district is a healthy one, and infectious disease is infrequent. There is very little insanitary property, and only about 36 overcrowded houses. No particular occupation can be accused of causing an undue amount of sickness or mortality. A considerable number of houses have been erected within the last five years, and to these have come people from other districts. So that despite the estimate of the population by the Registrar-General, those on the spot know well that the population of the district has increased markedly owing to this immigration. Casual enquiry easily elicits the fact that the occupants of the new houses are for the most part not former residents of this district, so that their number obviously adds to the population.



**TABLE A. BIRTH RATE, DEATH RATE, AND ANALYSIS OF MORTALITY, 1925.**

	Birth Rate per 1000 Total Population.	ANNUAL DEATH RATE PER 1,000 POPULATION.										Rate per 1,000 Births.		Percentage of Total Deaths.		
		All Causes.	Enteric Fever.	Small-pox.	Measles.	Scarlet Fever.	Whooping Cough.	Diphtheria.	Influenza.	Violence.	Diarr. and Enteritis under 2 years.	Total Deaths under 1 year.	Certif. Causes of Death.	Inquest Cases.	Un-certified Causes of Death.	
England & Wales ..	18.3	12.2	0.01	0.00	0.13	0.03	0.15	0.07	0.32	0.47	8.4	75.	92.1	6.9	1.0	
105 County Boro's and Great Towns, including London	18.8	12.2	0.01	0.00	0.17	0.03	0.18	0.09	0.30	0.43	10.8	79.	92.1	7.3	0.6	
157 Smaller Towns, 20,000-50,000....	18.3	11.2	0.01	0.00	0.15	0.02	0.14	0.06	0.31	0.38	7.6	74.	93.0	5.9	1.1	
London .....	18.0	11.7	0.01	0.00	0.08	0.02	0.19	0.11	0.23	0.46	10.6	67.	91.1	8.9	0.0	
Hipperholme .....	14.5	15.1	0.00	0.00	0.21	0.00	0.00	0.00	0.21	0.42	0.00	29.4	93.0	7.0	0.0	

## VITAL STATISTICS.

As above hinted, the estimate of population for 1925 shows a still further decrease upon that of last year. This, I am certain, is a mistake for the reasons mentioned. The birth rate is much higher than any for the last five years. So also is the death rate the highest since 1918, though naturally both these rates are affected by the lessened population. There were only two deaths of infants under 12 months out of 68 births, giving an infantile mortality of 29, so that these lives certainly were preserved to swell the numbers.

### EXTRACTS FROM VITAL STATISTICS FOR THE YEAR.

Registered Births—				Total.	Male.	Female.
Legitimate	..	..	64			
Illegitimate	..	..	4	68	32	36
Birth Rate				..	..	14.5
Deaths—	..	..	..	71	33	38
Death Rate				..	..	15.1

Number of women dying in or in consequence of childbirth :—None.

Deaths of Infants under 1 year per 1000 births :—

Legitimate, 31.2 : Illegitimate, none : Total, 29.4

Deaths from Measles (all ages)	0	Rate per 1000 population	0.21
„ Whooping Cough	.. 0	..	0
„ Diarrhœa (under 2 years)	0	..	0

A reference to the census figures shows that in 1911 the population was 4438, and in 1921, 4799. In view of the comparatively large number of houses built and occupied by families from other districts since that date, the population to-day will obviously be greater. In 1921 there were 1321 inhabited houses, in 1925 there were 1495 inhabited houses. Each of these represented a family of two or more persons, so that their number falls to be added to the population. I think these figures are sufficient to illustrate my point.

TABLE I.—CAUSES OF AND AGE AT DEATH.

Cause of Death.	Sex	Under 1	1 and und. 5	5-15	15-25	25-45	45-65	65 & over	Total
Measles .. ..	M	—	1	—	—	—	—	—	1
Influenza .. ..	M	—	—	—	—	—	—	1	1
Pulmonary Tuber- culosis .. ..	F	—	—	—	1	1	—	—	2
Other Tubercular Disease .. ..	M	1	—	—	—	—	—	—	1
Cancer .. ..	M	—	—	—	—	—	3	2	5
	F	—	—	—	—	1	3	1	5
Diabetes .. ..	F	—	—	—	—	—	1	—	1
Cerebral Hæmorr- hage .. ..	M	—	—	—	—	—	1	—	1
	F	—	—	—	—	—	1	3	4
Heart Disease ..	M	—	—	—	1	1	1	2	5
	F	—	—	—	—	—	4	7	11
Arterio-Sclerosis ..	M	—	—	—	—	—	2	1	3
	F	—	—	—	—	—	—	1	1
Bronchitis .. ..	M	—	—	—	—	—	—	4	4
	F	—	—	—	—	—	—	2	2
Pneumonia .. ..	M	—	1	—	—	2	—	2	5
	F	1	—	—	—	—	1	1	3
Appendicitis .. ..	M	—	—	—	—	—	1	—	1
	F	—	—	—	—	—	1	—	1
Nephritis .. ..	M	—	—	—	—	—	1	—	1
Deaths from Violence .. ..	M	—	—	—	—	—	1	—	1
	F	—	—	—	—	—	—	1	1
Other defined diseases .. ..	M	—	—	—	—	—	3	1	4
	F	—	1	—	—	—	3	3	7
Totals .. ..		2	3	—	2	5	29	32	71

33 Males and 38 Females.

Turning to the causes of death, it will be noted that there were five more deaths in 1925 than in 1924. This is due to heart disease, cancer, pneumonia, and other unclassified diseases taking an increased toll of life. On the other hand, nephritis and infantile diseases caused less deaths in 1925 than the previous year. Tuberculosis mortality was extremely light, both from pulmonary and other infection. As is usual, nearly half the deaths were in persons over 65, and curiously enough more females died than males. The infantile mortality was very low, only two deaths taking place under 12 months of age. This tends to compensate to a certain extent for the increased deaths of other ages, replacing the old with the young, as is natural.

**NOTIFIABLE DISEASES.**

Disease.	Total cases notified.			Admitted to Hospital.	Deaths.
Smallpox .. ..	2	2	0		
Scarlet Fever .. ..	12	10	0		
Puerperal Fever .. ..	1	0	0		
Erysipelas .. ..	5	1	0		
Pneumonia .. ..	8	0	8		
Tuberculosis—(a) Pulmonary	3	1	2		
(b) Nonpulmonary	3	1	1		
Ophthalmia Neonatorum ..	1	0	0		
Chickenpox .. ..	1	0	0		
Totals .. ..	36	15	11		

The table shows the number of cases of infectious disease notified during the year. It will be noted to be small, but the occurrence of two cases of smallpox is noteworthy, as this disease had been absent from the district for a considerable number of years (since 1904). A full report upon the outbreak was submitted to the Council, but for purposes of reference, brief note of the circumstances may be made here.

The first case was a child of nine years old. A most peculiar fact concerning the method of infection of this child is that she had been confined to her house for about six weeks previous to the onset of smallpox with other illness. The most searching enquiry completely failed to reveal any person who had visited the house at the time the child must have been infected suffering from any spots suggestive of smallpox. The sole connecting link of any kind was the fact that her Sunday school teacher had a brother who probably had an aberrant attack of smallpox. But this teacher had not visited the house during the child's present illness. The same doctor was in attendance on the young man above mentioned and also the affected child. This was the only link discoverable. The sweetheart of this young man developed smallpox, and was removed to hospital. The second case was sister to the first, and commenced smallpox on December 16th, having been successfully vaccinated on December 12th. Her spots appeared 20th and 21st. The first case commenced on November 29th, and spots developed December 2nd. She was notified to me on December 10th at night, and was removed to hospital the following morning, owing to the fact that the moor road to the smallpox hospital was impassable at night. No other cases developed. All contacts were offered and

all but three accepted vaccination. Fourteen vaccinations were performed by the M.O.H. All bedding was destroyed, houses disinfected, and walls stripped. Clothing also was all disinfected. The father of the child and a contact who were engaged in milk distribution agreed to keep from this work for the quarantine period, as did the sisters of the case who were dressmakers. All contacts were inspected daily during quarantine period.

Chickenpox was made notifiable for six months.

**TABLE II.**  
**NOTIFICATIONS OF INFECTIOUS DISEASES SINCE 1890.**

Year.	Smallpox.	Diphtheria.	Tuberculosis All Forms.	Erysipelas.	Scarlet Fever.	Enteric Fever.	Continued Fever.	Puerperal Fever.	Measles.	Total.
1890	—	—	—	2	2	1	—	—	—	5
1891	—	—	—	2	13	1	—	—	—	16
1892	54	—	—	3	11	—	1	—	—	69
1893	3	2	—	3	1	2	—	—	—	11
1894	—	—	—	2	15	4	—	—	—	21
1895	—	—	—	—	3	4	1	—	—	8
1896	—	—	—	2	24	5	5	—	—	36
1897	—	3	—	4	28	1	—	—	—	36
1898	—	—	—	4	5	7	1	—	—	17
1899	—	1	—	2	21	—	—	—	—	24
1900	—	—	—	2	13	3	2	—	—	20
1901	—	—	—	—	2	3	—	—	—	5
1902	—	1	—	—	7	2	—	—	—	10
1903	2	2	—	1	4	2	—	—	—	11
1904	3	1	—	1	8	—	1	—	—	14
1905	—	—	—	8	4	1	—	—	3	16
1906	—	11	—	1	8	1	—	—	51	72
1907	—	4	—	3	24	1	—	—	39	71
1908	—	3	—	2	1	1	—	—	94	101
1909	—	4	—	1	13	1	—	—	18	37
1910	—	1	—	3	46	—	—	—	86	136
1911	—	50	—	3	19	—	—	—	3	75
1912	—	1	16	3	1	—	—	—	19	34
1913	—	11	9	5	43	—	—	—	60	128
1914	—	3	8	1	21	—	—	—	8	41
1915	—	14	11	2	3	—	—	—	217	249
			Pul.	Oth.						
1916	—	3	1	1	1	—	—	—	85	91
1917	—	2	2	2	8	—	—	—	26	38
1918	—	5	4	11	7	1	—	—	120	142
1919	—	9	3	4	1	6	1	—	12	33
1920	—	6	4	4	—	15	1	—	—	24
1921	—	5	2	2	—	15	—	1	—	25
1922	—	6	3	3	—	31	—	1	—	44
1923	—	6	5	8	3	14	—	2	—	30
1924	—	1	3	3	—	15	3	—	—	23
1925	2	—	3	6	3	5	12	—	—	25

## SCARLET FEVER.

This disease was represented by 12 cases. In 1924 there were 15, in 1923, 14, but in 1922 there were 31. Previous to this, one has to go back to 1914 for a serious outbreak, when there were 43 cases. But on the whole the incidence of the disease is low.

## DIPHTHERIA.

The table shows that this disease is even less prevalent in the district than scarlet fever. There were no cases in 1925, 1 in 1924, and 6 in 1923. The last epidemic year was 1911 with 50 cases.

## ENTERIC.

Fortunately this disease is very rare indeed in Hipperholme. The most cases there have ever been since 1890 occurred in 1898, when there were seven. Since 1904 one case is all that most years have produced, and from 1909 to 1918 there were no cases at all. There were three cases unconnected with each other in 1924, and none last year. These three cases represent all that there were in the five years from 1921. They were all due to paratyphoid B infection, and ascribed to shellfish.

Puerperal Fever is scarcely ever recorded in Hipperholme. Not till 1921 was a case notified, followed by 1 in 1922 and 2 in 1923. No cases occurred in 1924, and but 1 in 1925. One of these notified in 1923 died.

## PNEUMONIA.

This disease is very badly notified, and as a rule the majority of deaths from it have not been previously notified. In 1925, 8 cases were notified, of which 2 died. Six deaths took place in cases which had not been notified, 4 out of the district. Notifications of pneumonia during the past five years have been as follows :—1921 8, 1922 19, 1923 8, 1924 20, and 1925 8. The numbers vary considerably, due probably not to any fluctuation in incidence but to varying notification. Often, of course, pneumonia may be so rapidly fatal that there is hardly more than time to write the death certificate. But as a rule its course is a week or more. However, I suppose the practitioner, seeing no benefit accrues to the patient from notification, does not see the necessity of so doing. This, of course, renders useless any statistics upon the incidence of the disease.



## TUBERCULOSIS—

## (1) PULMONARY.

There were three notifications of this disease in 1925. One case proved fatal the same year, it had been notified previously. Another fatal case had not been notified. In 1924 there were 4 cases and 5 deaths, one of the latter unnotified. In 1923, 5 cases and 8 deaths took place. From this year back records show that the incidence of the disease as notified has been low. This is only to be expected when one considers that there is very little over crowding, and that the district is largely a residential one, with no slums and but little insanitary property.

## (2) NON-PULMONARY.

Only 3 cases and 1 unnotified death from meningitis were recorded in 1925. In 1924 no notifications were received. In 1923 there were 3 cases and 1 death. This form of tuberculosis is even less commonly met with in the district than is the pulmonary form. But I am afraid that some cases of both forms of the disease are never notified, nor are they discovered. Tubercular cervical glands are very rarely notified but fairly commonly occur, and one wonders how it is that they are practically never notified in this district. Possibly there are none—I hope not, but I doubt it. Tubercular bones often also escapes notification. Now these cases, as also the lung causes, can very definitely be benefitted by notification, and moreover, the contacts can be benefitted, also even the public at large. How is tuberculosis to be stamped out if the cases are not known, isolated, and rendered innocuous to others? The tubercular milk worker can now be dealt with, and segregation can be enforced on infectious cases for the benefit of others. Let us give these measures a chance to prove their worth, and make a real effort to eradicate this scourge from our midst. Why tolerate longer the tubercular baker, confectioner, or fruiterer? It is not now necessary, and why should the public be obliged to endanger themselves owing to these persons? Make them well, and segregate them until they are no longer infectious.

Erysipelas is ever with us, but rarely proves fatal. Its incidence is shown in the table.

**TABLE III.**  
**INCIDENCE OF INFECTIOUS DISEASES IN AGE GROUPS.**

DISEASE.	Under 1	AGE GROUPS.										Total Cases	Sex, M   F	
		1-2	2-3	3-4	4-5	5-10	10-15	15-20	20-35	35-45	45-65 over			
Scarlet Fever ..	..	—	1	—	1	4	2	2	2	—	—	12	6	6
Smallpox ..	..	—	—	—	—	1	—	—	1	—	—	2	—	2
Puerperal Fever ..	..	—	—	—	—	—	—	—	1	—	—	1	—	1
Erysipelas ..	..	—	—	—	—	—	—	—	—	—	2	3	2	3
Pneumonia ..	..	1	—	2	1	—	1	—	1	—	—	8	7	1
Tuberculosis ..	..	—	—	—	—	—	—	—	—	—	—	6	—	—
(a) Pulmonary ..	..	—	—	—	—	—	1	1	—	1	—	3	2	1
(b) Other ..	..	—	—	—	—	—	1	—	1	1	—	3	1	2
Chickenpox ..	..	1	—	—	—	—	—	—	—	—	—	1	—	1
Totals ..	..	2	1	2	2	5	4	3	6	2	2	35	18	17



TABLE IV.

## INFLUENCE OF HOUSING UPON INFECTIOUS DISEASE.

## CASES OF INFECTIOUS DISEASE IN RELATION TO PERSONS PER ROOM.

Disease.	Less than 1 per room.	1-2 persons per room.	2-3 persons per room.	3-4 persons per room.	4-5 persons per room.
Smallpox ..	—	2	—	—	—
Scarlet Fever ..	5	4	2	—	1
Puerperal Fever..	—	1	—	—	—
Erysipelas ..	5	—	—	—	—
Pneumonia ..	1	5	2	—	—
Tuberculosis—					
(a) Pulmonary	1	2	—	—	—
(b) Other ..	1	2	—	—	—
Ophthalmia Neonatorum ..	—	1	—	—	—
Totals ..	13	17	4	—	1

Ophthalmia neonatorum affected one child, whose sight was unimpaired thereby.

All bacteriological work in connection with health matters is done at the County Laboratory.

The County also are responsible for the care of cases of tuberculous and venereal disease.

## HOSPITALS OF THE DISTRICT.

There are no special hospitals for tuberculosis, maternity, children, or special affections such as eye or ear. Those in the neighbouring towns of Halifax, Huddersfield and Bradford serve the needs of the area.

Isolation hospital cases are treated at the Clifton Hospital of the Brighouse Joint Hospital Board, of which Board Hipperholme is a member. Smallpox cases are also dealt with by the same Board, being treated at the Halifax Smallpox Hospital, under an arrangement made twenty years ago with the Corporation of Halifax. The two cases of the disease which occurred during the year were so treated.

The County have completed arrangements by which any case of puerperal fever arising in the area will be treated at St. Luke's

Hospital, Halifax. Ophthalmia neonatorum cases can be taken to any hospital, and on the recommendation of the M.O.H. the County defrays the cost, as also they do for puerperal fever cases. So far advantage has not been taken of these arrangements, which were completed in 1924.

### **AMBULANCE FACILITIES.**

(A) Infectious cases use the Ambulance of the Joint Hospital Board, except in the case of smallpox, when the Ambulance is sent over from Halifax Fever Hospital.

(B) Non-infectious cases are conveyed in the Brighthouse Corporation Ambulance, the Urban District being responsible in the first place for the cost, which they recover, if possible, from the patient.

### **CLINICS AND TREATMENT CENTRES.**

None in the district. The nearest Child Welfare Centre is that at Brighthouse, and Hipperholme mothers are welcomed there if they care to attend. The County defrays the cost. Several mothers have made use of this Clinic from the district.

There is no School Clinic for this district. The County School Nurse visits schools and school children..

The nearest Tuberculosis Dispensary is that maintained by the County at Brighthouse. The District Tuberculosis Officer attends every Thursday.

No Clinic for Venereal Diseases is nearer than that at the Halifax Royal Infirmary.

### **PUBLIC HEALTH STAFF.**

MEDICAL OFFICER OF HEALTH: F. A. Belam, M.D., Ch.B., D.P.H., M.R.S.I. Also Medical Officer of Health and School Medical Officer of Brighthouse, M.O.H. Halifax Rural District and Medical Superintendent Joint Hospital Board.

SANITARY INSPECTOR: S. Dean, M.Inst.M. & Cy. E., A.R.S.I., P.A.S.I., also Surveyor and Water Engineer.

### **NURSING ARRANGEMENTS.**

Professional Nursing in the home :

- (a) General. Two District Nurses are occupied in Hipperholme. One is subsidised by the County, and the other is maintained by voluntary contributions.

- (b) Fever. There are no nurses undertaking this work.
- (c) Midwives. Two certified under the Midwives' Board practise in the district. The County is the supervising Authority.

## **LAWS, ORDERS AND BYELAWS IN FORCE IN THE DISTRICT.**

### **Adoptive Acts :**

Public Health Acts Amendment Act, 1890.

Public Health Acts (Amendment Act), 1907. Parts 2, 3, 4 and 6, and Section 95 in Part 10.

### **Byelaws :**

Cleansing of Footways and Refuse Removal—August, 1891.

Nuisances—August, 1891.

Streets and Buildings—January, 1899.

Slaughterhouses—August, 1891.

Offensive Trades—August, 1891.

Dairies and Cowsheds Regulations—February, 1898.

## **WATER SUPPLY.**

Water is supplied to the whole district, with the exception of 13 houses in outlying parts, in a piped service from the Halifax reservoirs. Hipperholme has an agreement with the Halifax Corporation for the supply of their water. This is a continuous supply, and is laid on to each house. The 13 houses not so supplied derive their water from wells, owing to the distance they lie from the water mains, and the refusal of the owners to meet the Council in installing a piped supply, due to the cost.

On any suspicion of pollution, this well supply is analysed. Up to the present no polluted water supply has been discovered.

The Halifax water is collected in large reservoirs gathering from the moors. It is thence supplied direct to consumers, and is not filtered or sterilised in any way. Coming from the peat, the chemical analysis is always very satisfactory, except for plumbo solvency. Bacteriological analysis frequently reveals. *B. coli* in 10 c.c. and 5 c.c., but on the whole agar and gelatine plate counts of organisms are fairly low.

No epidemic of any kind has yet been ascribed to this supply to my knowledge, and a watch is of course kept upon the purity of the water by the Halifax authorities.

## **RIVERS AND STREAMS.**

There is one stream in Hipperholme which frequently shows evidence of pollution by picric acid or some allied substance. This

is due to the presence of a large chemical works. The stream is not used for drinking purposes.

### **DRAINAGE AND SEWERAGE.**

With the exception of certain parts difficult of access the whole district is sewered. These sewers empty into the Brighthouse ones, and thence to the Sewage Disposal Works of the latter Corporation.

### **CLOSET ACCOMMODATION.**

During the five years with which this Report deals, very great strides have been made towards placing the whole district upon the water carriage system. Only about 2% of houses are not now upon this system. Every landlord has been served with notice to convert existing conveniences to water carriage, and those who have not done so up to date have very peculiar difficulties to contend with. There are some 20 privies to which this statement applies, which are all that class of convenience remaining in the district. Twelve pail closets remain in houses which are under notice of demolition as soon as the tenants can obtain other accommodation.

The table shows the rate of conversions from 1921 to date.

### **CONVERSIONS TABLE.**

		1921	1922	1923	1924	1925
Pail or Tub Closets	..	9	9	13	12	12
Privy Closets	..	169	82	38	31	23
Waste Water Closets	..	54	54	54	54	54
Water Closets	..	1038	1142	1205	1241	1295
Ashpits	..	279	316	322	322	321
Ashbins	..	636	708	756	796	852

I think the figures show how admirably the Council have realised their public health obligations, and how well owners have responded in meeting their requests.

### **SCAVENGING.**

Just at the commencement of the period of this Report, horse haulage was replaced by motor for purposes of scavenging. Two motors are now maintained by the Council for this purpose. A definite policy has also been adopted for the substitution of ashpits by ashbins, and the latter type of receptacle for household refuse now predominate

in the proportion of about 71% to the total. They are, of course, far more sanitary, and are emptied regularly weekly. At the end of 1924 it was decided to replace the old system of tipping into quarries by the "Bradford" system of tipping in layers of about 6 feet deep. Each load as tipped is immediately covered by a man employed full time on the job. The sides are sloped at a set angle, and sown down with grass, and shrubs planted. During the twelve months of its working the system has turned out admirably. There is no nuisance or unsightliness whatever, and the land is being brought up to the level of the main road by which it is situated, and will doubtless eventually become useful for building. The observations of the Sanitary Inspector are appended. A table shows the numbers of ashpits and ashbins. The apparent increase of the number of ashpits is due to conversion of privy middens to W.C.s, leaving ashpits which owners refused to replace by bins.

### **SMOKE ABATEMENT.**

Considerable work has been done towards the abolition of the smoke nuisance in Hipperholme. Every year a large number of smoke observations are taken by the Sanitary Inspector, and any unsatisfactory chimney is notified to the firm responsible. The Council have taken a keen interest in this work, and have on many occasions instructed the Clerk to communicate with defaulting firms. As a result, noteworthy improvement has taken place. If the firms did but realise that waste smoke is waste fuel and avoidable expense, and that noxious smoke emission means faulty care of boiler fires, and thus incomplete combustion of fuel, they would, I am sure, do even more than they are doing to abate any nuisance from this cause.

The detailed report upon smoke observations will be found in the statement of the Sanitary Inspector.

### **SCHOOLS.**

The three schools under elementary educational control are regularly inspected by the M.O.H., and a report submitted to the Council upon their sanitary condition. If necessary the Council give instructions that the Divisional Clerk should be communicated with. The schools are all on the water carriage system of conveniences, which are flushed regularly. Bailiff Bridge is a model sanitary school. That at Lightcliffe is lacking in efficient ventilation, while that at Hipperholme is reasonably satisfactory.

### **HOUSING.**

The general housing condition of the district is on the whole good.



There are a certain number of back-to-back houses in Bailiff Bridge, and a few really insanitary houses. Of these latter, about a dozen have been condemned, and will be demolished as soon as the tenants can be got out. As previously mentioned, there are unfortunately no houses being built which can be said to directly remedy overcrowding or give accommodation to the poorer class. What the "subsidy" houses being built can do is to give better houses to those living in poorer houses who can afford better, and thus leave their houses vacant for those poorer still. But this obtains only to a small degree, and for the most part new houses are occupied by new people to the district. A study of the 1921 Census returns shows that 48 families were then living in overcrowded conditions, adopting the standard of two persons per room as satisfactory. This is a standard suggested by the Registrar-General, but even with two persons per room overcrowding may easily exist, as it makes no allowance for sex or living and bedrooms. The table indicates the exact extent of the overcrowding, and is taken direct from the Census report.

Number of persons in family.	Number of overcrowded families occupying the following number of rooms.				
	1	2	3	4	5 and over
3	1				None.
4	2				
5		16			
6		7			
7		3	10		
8			6		
9			2	1	
	3	26	18	1	

Total number of persons living in overcrowded conditions . . . 299  
 Percentage of Population . . . . . 6.2%

The general defects found in houses are insufficient ventilation, which, of course, generally refers to those of the back-to-back type; insufficient light, due to old type small casement windows; and dampness, due to defective roof or walls. Wherever possible these defects are righted, but as can easily be seen, it is not always possible to rectify, and cases exist where the house is really not worth making sanitary from the owner's point of view, though it decidedly is from

that of the tenant. These cases are extremely difficult to deal with, owing to the lack of alternative accommodation. However, owners are urged to make their houses as sanitary as possible under existing circumstances. On the whole the tenants look after their houses fairly well, though there are, naturally, exceptions.

There are no unhealthy areas in the district.

## HOUSING STATISTICS.

Number of new houses erected during the year :—

(a) Total (including numbers given separately under (b))	49
(b) With State assistance under the Housing Acts :	
(i) By the Local Authority .. .. .	None.
(ii) By other bodies or persons .. .. .	41

### 1. UNFIT DWELLING-HOUSES.

Inspection—(1) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts) .. .. .	24
(2) Number of dwelling-houses which were inspected and recorded under the Housing (Inspection of District) Regulations, 1910, or the Housing Consolidated Regulations, 1925 .. .. .	24
(3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation .. .. .	1
(4) Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation .. .. .	13

### 2. REMEDY OF DEFECTS WITHOUT SERVICE OF FORMAL NOTICE.

Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their officers .. .. .	4
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### 3. ACTIONS UNDER STATUTORY POWERS.

A.—Proceedings under section 3 of the Housing Act, 1925.

(1) Number of dwelling-houses in respect of which notices were served requiring repairs ..	None.
(2) Number of dwelling-houses which were rendered fit after service of formal notices :—	
(a) By owners .. .. .	None.
(b) By Local Authority in default of owners ..	None.

(3) Number of dwelling-houses in respect of which Closing Orders became operative in pursuance of declarations by owners of intention to close .. None.

**B.—Proceedings under Public Health Acts.**

(1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied .. 8

(2) Number of dwelling-houses in which defects were remedied after service of formal notices :—

(a) By owners .. .. . None.

(b) By Local Authority in default of owners .. None.

**C.—Proceedings under sections 11, 14, and 15 of the Housing Act, 1925.**

(1) Number of representations made with a view to the making of Closing Orders .. .. . 0

(2) Number of dwelling-houses in respect of which Closing Orders were made .. .. . 0

(3) Number of dwelling-houses in respect of which Closing Orders were determined, the dwelling-houses having been rendered fit .. .. . 0

(4) Number of dwelling-houses in respect of which Demolition Orders were made .. .. . 0

(5) Number of dwelling-houses demolished in pursuance of Demolition Orders .. .. . 0

## **INSPECTION AND SUPERVISION OF FOOD.**

### **(A) MILK SUPPLY.**

The farms in the district, which number 14, are kept under constant supervision. Their condition as to cleanliness of cowsheds and cattle has very markedly improved during the past two years.

Unfortunately, the standards of the cowsheds as to ventilation, air space and lighting are not so good as one could wish. Fourteen out of 25 cowsheds have under 600 cubic feet of air space per cow, only 7 have 3 square feet of lighting area or over, 10 have no permanent ventilation to the open-air, and 7 have no channel for drainage.

To sum up, only three farms can be described as very satisfactory in all respects, and one farm is very unsatisfactory. Though the others are still not satisfactory, the farmers in each case, except the one mentioned and one other, have made real efforts to keep the mistals and cattle clean. Also definite improvement in air space, lighting, ventilation, and drainage have been actually carried out or been



promised. On the whole, farmers have received suggestions favourably, though one or two are very antagonistic. All have received a form of simple instructions on how to produce clean milk, and the majority have really tried to follow it out. But even so, washing udder and clipping hair on that part, together with efficient cleansing of dung from flanks, still remain to be stressed and their importance insisted upon.

Cans are kept very satisfactorily on the whole, but more dairies are required, very few farms possessing one. What is urgently needed, however, is frequent and regular veterinary inspection of all cattle, so that the risk of tubercular milk may be avoided. This is a matter for the County Council to arrange, as I understand that the Urban District has no authority to appoint a Veterinary Inspector. Moreover, the County is the authority under the Tuberculosis Order, and as such has the enforcement of that Order and the carrying out of the protection which its provisions afford the public in its care.

Also all sampling of milk, whether for tubercle bacilli or other, is in the hands of the County, so that the Urban District must rely upon them alone for the protection of their milk supply from tubercular infection.

#### (B) MEAT.

There are two private slaughter houses in the district, at which a certain amount of killing takes place. The bulk of the slaughtering of cattle is, however, carried out elsewhere, and the meat brought into the butchers' shops for sale in Hipperholme. Generally speaking, it is only sheep slaughter which is done at the local slaughter houses. The M.O.H. pays frequent visits of inspection to these slaughter houses. They always are clean and well kept, and any meat seen has been satisfactory. One slaughter house is registered and one licensed. There is no qualified inspector with a meat and foods certificate in the service of the Council.

Bakehouses have all been inspected by the M.O.H., and found satisfactory.

### **FACTORIES AND WORKSHOPS.**

During the year an inspection was carried out by the M.O.H. of all factories and workshops in the district. The sanitary conditions were noted, and the attention of the owners called to any defects. On the whole, such defects were trivial, and do not demand any special reference. The condition of these places was satisfactory generally, and sanitary conveniences all on the water carriage system.

# HIPPERHOLME URBAN DISTRICT COUNCIL.

## SANITARY INSPECTOR'S REPORT FOR YEAR ENDING DECEMBER 31st, 1925.

SAM DEAN, P.A.S.I., M.Inst.Mun. & Cty.E., Cert. R.San.I.,  
Sanitary Inspector.

GENTLEMEN,

I have pleasure in presenting to you my Annual Report for the year ended 31st December, 1925, covering the Sanitary work of the district.

Inspections made .. .. .	544
Nuisances reported to Sanitary Authority .. ..	44
Nuisances abated during the year .. ..	43
Preliminary Notices served .. .. .	47
Statutory Notices served .. .. .	6
Preliminary Notices outstanding Dec. 31st, 1925 ..	6
Statutory Notices outstanding Dec. 31st, 1925 ..	5
Nuisances outstanding Dec. 31st, 1925 .. ..	14

The Nuisances dealt with were as follows :—

Blocked drains .. .. .	7
Housing defects .. .. .	7
Defective W.C. .. .. .	1
Defective ashes bins .. .. .	17
Blocked sewers .. .. .	3
Tipping refuse .. .. .	3
Drain not connected to sewer .. .. .	1
Defective ashpit .. .. .	1
Defective privy and ashpit .. .. .	2
Defective pail .. .. .	1
Drainage .. .. .	1

There have been the following alterations in the Sanitary accommodation of the district during the year :—

Privy closets converted to water closets	..	..	4
Privy closets demolished..	..	..	4
Additional W.C.s for new property	..	..	49
Additional ashes bins for new property	..	..	49
Privy middens converted to ashes bins..	..	..	3
Privy middens converted to ashpits	..	..	2
Additional ashes bins	..	..	4

The following table gives the Sanitary accommodation for dwelling-houses at 31st December, 1925 :—

Pail or tub closets..	..	..	..	..	..	12
Privy closets	..	..	..	..	..	23
Waste water closets	..	..	..	..	..	54
Water closets	..	..	..	..	..	1295
Dry ashpits..	..	..	..	..	..	321
Ashes bins	..	..	..	..	..	852

### SCAVENGING.

The Council undertake the removal of household refuse, also trade refuse where requested on payment, the collection being carried out with the Council's own staff, using motor haulage. Ashes bins are emptied once per week, and ashpits every three or four weeks as required. The system of collection is very efficient, and a minimum of complaints are received.

Prior to November, 1921, the work was done by team labour, and was very unsatisfactory, the supply of team labour and manual labour being insufficient to have a proper system, and complaints were received daily. In November, 1921, motor haulage was adopted, and proper systematic collection arranged.

1049 loads of household refuse were removed in 1925, giving an approximate weight of 1549 tons.

Prior to 1925, the refuse was disposed of by tipping in an open quarry, and owing to the large exposed face, complaints were numerous as to paper blowing about, and the tip was from time to time rat infested.

In January, 1925, the Council purchased land for a tip, and the rubbish is now tipped on the layering system.

The refuse is disposed of at the tip off Bradford Road, where a man is kept continuously employed; his duty is to keep the tip tidy and cover up all refuse as deposited, and particularly when closing

down at night and week-end. This system of tipping is found quite satisfactory—no one complaint has been received since the tip was got into systematic working, and no sign of rat infestation has been seen.

### SLAUGHTERHOUSES.

There are two slaughterhouses in the district, one licensed and one registered. 17 inspections have been made during the year. One of the slaughterhouses is always well kept and clean; the other is not in as good a position nor as good in construction, but fairly well looked after.

### COWSHEDS.

No. of cowsheds .. .. .	26
No. of cowkeepers .. .. .	15
No. of retail milksellers .. .. .	12
No. of inspections made .. .. .	43

Many of the cowsheds are of a low standard of cubical contents, and there is serious difficulty in getting these brought up to standard. Special attention in the meantime is being paid to cleanliness, and whilst in some cases the sheds are always well kept and clean, in others continual oversight is essential to keep up a moderate standard.

### INFECTIOUS DISEASES.

There has been a low incidence of infectious disease during the year, the worst feature being an outbreak of smallpox, two cases being notified. Prompt measures of vaccination, isolation and disinfection were taken under the instructions of the Medical Officer, and fortunately the outbreak was confined to these two cases.

After a case of infectious disease is removed to hospital, the house and bedding are fumigated, and in cases of non-removal to hospital, instructions as to isolation are given, and fumigation carried out as soon as the patient is well.

Twenty-eight fumigations were carried out during the year.

### WATER SUPPLY.

The water supply of the district is purchased in bulk from the Halifax Corporation, and is a satisfactory supply.

Two short extensions of mains to supply new property have been laid during the year, and one defective main has been relaid.

Thirteen houses in the district are supplied from private source. No suspicion has fallen on these sources of supply.

## SEWERS.

Two new sewers have been constructed to serve new property, and three defects found in sewers have been remedied.

There are no outstanding cases of lack of sewers.

## SEWAGE DISPOSAL.

By agreement, the sewage of the district is treated at the Brighouse Corporation Sewage Disposal Works.

## FACTORIES AND WORKSHOPS.

- 8 Factories registered with more than 40 employees.
- 13 Factories registered with not more than 40 employees.
- 15 Workshops registered.
- 39 Inspections have been made.
- 4 Notices served for defects in sanitary accommodation.
- 40 Smoke observations have been taken, and this attention has materially reduced the amount of smoke emitted, but more improvement in this direction is desirable. No legal action has been taken.

A Conference was attended at Leeds, representing the authorities in the West Riding, on the question of smoke abatement, and it is hoped that as a result of this conference a uniform method of dealing with this question will be arrived at throughout this and the surrounding districts.

There are two factories in which offensive trades are carried on, both tanneries. The premises are kept in a clean condition, and no complaints have been received.

Two of the workshops are registered as bakehouses, and these are well kept, no action being necessary.

## SCHOOLS.

The three schools in the district have been inspected, and a request for better flushing of the water closets was made, and attended to.

## CARAVANS.

Two caravans are erected in the district, and used for human habitation, and in neither case are they satisfactory dwellings.

**HOUSING.**

Houses inspected .. .. .	24
Satisfactory on inspection .. .. .	11
Found totally unfit .. .. .	1
Houses found with defects .. .. .	12
Houses with defects remedied .. .. .	4
Houses with defects and formal notices served .. .. .	8
Number of unfit houses from last report .. .. .	7
Unfit houses as above .. .. .	1
<hr/>	
Total of unfit houses .. .. .	8
Total number of houses in the district .. .. .	1495
Total number of working class houses .. .. .	1169

GENERAL STANDARD OF HOUSING.—There are 230 back-to-back houses, and in addition 30 are below the recognised standard of fitness.

OVERCROWDING.—12 badly overcrowded, 24 morally overcrowded.

Total number of houses erected in 1925 under the 1923

Subsidy Scheme by private enterprise .. .. .	41
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Total number of other houses erected in 1925 by private enterprise .. .. .	8
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No houses have been erected by the Council.

Total houses erected of all kinds .. .. .	49
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This concludes my report for the year ended 31st December, 1925.

Gentlemen, Your obedient servant,

SAM DEAN,

Sanitary Inspector.



